FILED UNDER 35 U.S.C. 871

| 4 | FILED UNDER 35 U.S.C. 371 | | | | PATENT NUMBER and ISSUE DATE | |
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| 00 U.S. APPLICATION NUMBER | . UTILITY Patent | | | | | |
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| NOTICE OF ALLOWANCE MAILED | | CLAIMS ALLOWED | | | |
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| | Assistant Examiner | Total Claims Print Claim for O.G | | | |
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| | Primary Examiner | | | | |
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| TERMINAL | PREPARED FOR ISSUE | Application Examiner | | | |
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